TRANSMITTAL AND NOTICE OF APPROVAL OF	1. TRANSMITTAL NUMBER:	2. STATE
STATE PLAN MATERIAL	04-009	Arizona
The second secon		
FOR: CENTERS FOR MEDICARE AND MEDICAID SERVICES	3. PROGRAM IDENTIFICATION: TITLE XIX OF THE SOCIAL SECURITY ACT (MEDICAID)	
TO: REGIONAL ADMINISTRATOR	4. PROPOSED EFFECTIVE DATE	
CENTERS FOR MEDICARE AND MEDICAID SERVICES	July 1, 2004	
DEPARTMENT OF HEALTH AND HUMAN SERVICES		
5. TYPE OF PLAN MATERIAL (Check One):		
	CONSIDERED AS NEW PLAN	
COMPLETE BLOCKS 6 THRU 10 IF THIS IS AN AME		amendment)
6. FEDERAL STATUTE/REGULATION CITATION:	7. FEDERAL BUDGET IMPACT:	
42 CFR 440.130	a. FFY 2004-2005 \$0 b. FFY 2005-2006 \$0	
O DAGE MIN (DED OF THE DI AM GEOTION OF ATTACHMENT.	b. FFY 2005-2006 \$0 9. PAGE NUMBER OF THE SUPERS	
8. PAGE NUMBER OF THE PLAN SECTION OR ATTACHMENT:	OR ATTACHMENT (If Applicable):	
Attachment 3.1-A Limitations, p. 4 and 6	OR ATTACHMENT (IJ Applicable).	
Attachment 3.1-A Elimitations, p. 4 and 0	Attachment 3.1-A Limitations, p. 4 and 6	
	Titudinion 3.1 II Diminions, p. 1 and 3	
10 OVER THE OF A LEEPING CENTER		
10. SUBJECT OF AMENDMENT:		
Marriage and family therapists, professional counselors and independent social workers now have to be licensed rather than certified to register with AHCCCS as behavior health service providers.		
register with AHCCCS as behavior health service providers.		
11. GOVERNOR'S REVIEW (Check One):		
GOVERNOR'S REVIEW (Check One).	☑ OTHER, AS SPECIFIED:	
COMMENTS OF GOVERNOR'S OFFICE ENCLOSED	2 0 11121, 112 21 20 11 11	
NO REPLY RECEIVED WITHIN 45 DAYS OF SUBMITTAL		
12. SIGNATURE OF STATE AGENCY OFFICIAL:	16. RETURN TO:	
13. TYPED NAME:		
Lynn Dunton		
14. TITLE:		
Assistant Director		
15. DATE SUBMITTED:		
August 30, 2004		4-44-
FOR REGIONAL OF		
17. DATE RECEIVED:	18. DATE APPROVED:	LIC ARAU
August 30, 2004	Octobe	er 15, 2004
PLAN APPROVED - ON		
19. EFFECTIVE DATE OF APPROVED MATERIAL:	20-SIGNATURE OF REGIONAL OF	
July 1, 2004	Discontinue and a second secon	nda Illinamoto
21. TYPED NAME:	22, TITLE: Associate Regional Admini	istrator
* Linda Minamoto	Division of Medicaid & Ch	ildren's Health
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23. REMARKS:		
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	THE CONTRACTOR OF STATE OF STA	

services as part of their respective area of practice (e.g., psychologists providing a behavioral health evaluation).

Outpatient Speech, Occupational and Physical Therapy Services. Outpatient speech, occupational and physical therapy services include individual and group therapy (e.g., neuromuscular re-education, wheel chair management, aural rehabilitation). These services are covered in accordance with the requirements in 42 CFR § 440.110. Providers of therapy services must be registered with AHCCCS and be state-licensed occupational therapists, physical therapist or speech-language pathologists. In addition, persons who have a Provisional Speech and Language Impaired Certificate must be supervised by an American Speech and Language Hearing Association-certified pathologist.

Nursing Services. Nursing services include direct nursing care services as identified in the IEP such as catheterization, suctioning and medication management, individual student health training and counseling, and training and oversight of school-based attendants. These services are covered in accordance with the requirements in 42 CFR § 440.130. School nursing personnel must follow the guidelines for care produced by the Rehabilitation Act of 1973, Section 504. Providers of nursing services must be registered with AHCCCS and be state-licensed as a registered nurse or a licensed practical nurse.

Transportation Services. Transportation services will be provided in compliance with HCFA policy and will be paid for when an eligible member's need for special transportation is specified in the IEP. These services are covered in accordance with the requirements in 42 CFR § 441.62. These services will only be reimbursed on the same day in which the member obtains another Medicaid covered reimbursable service through the LEA. Transportation services are not covered if the eligible member is transported on a school bus with other non-IDEA eligible students who are attending school. The LEA must be registered with AHCCCS as a transportation provider and must meet the same provider qualifications as all AHCCCS Medicaid transportation providers (e.g., proof of insurance and licensure of school bus drivers).

Behavioral Health Services. Behavioral health services include individual/group therapy, counseling and training, behavioral management, psychosocial rehabilitation and emergency and crisis stabilization. These services are covered in accordance with the requirements in 42 CFR § 440.130. Behavioral health providers must be registered with AHCCCS and be AHCCCS recognized independent practitioners, i.e., state licensed psychiatrists, state licensed Ph.D. psychologists and Arizona Board of Behavioral Health Examiners licensed marriage and family therapists, professional counselors and independent social workers. In addition, school-based school psychologists or school-based guidance counselors who are certified by the Arizona

6. Medical care and any other types of remedial care recognized under State law, furnished by licensed practitioners within the scope of their practice as defined by State law.

6a. Podiatrists' services.

Podiatry services when provided by a licensed podiatrist.

In order for a member to receive routine foot care, the member must be receiving medical treatment from a primary care provider for a systemic disease which is of such severity that performance of foot care services by a non-professional would be hazardous to the member.

6b. Optometrists' services.

Optometrists' services when they are provided by a licensed optometrist. See section 12d for limitations on eyeglasses and contact lenses.

6d. Other practitioners' services.

Other practitioners' services provided by:

- i. Respiratory Therapists
- ii. Certified Nurse Practitioners
- iii. Certified Registered Nurse Anesthetists
- iv. Non-physician First Surgical Assistants
- v. Physician Assistants
- vi. Licensed midwives within the limitations provided in the AHCCCS policy and procedures
- vii. Non-physician behavioral health professionals, as defined in rule, when the services are provided by social workers, physician assistants, psychologists, counselors, registered nurses, certified psychiatric nurse practitioners, behavioral health technicians, and other approved therapists who meet all applicable state standards. Except for behavioral health services provided by psychologists, certified psychiatric nurse practitioners and physician's assistants supervised by AHCCCS registered psychiatrists, licensed independent social workers, licensed marriage/family therapists, and licensed professional counselors, all non-physician behavioral health professional services shall be provided by professionals affiliated with an approved behavioral health setting in accordance with AHCCCS policies and procedures.